

PROJECT ID#				
KOJECI ID#				

Grove City Planning Commission

PRELIMINARY DEVELOPMENT PLAN APPLICATION

Please provide the requested information and submit to:

DEVELOPMENT DEPARTMENT 4035 BROADWAY GROVE CITY, OHIO 43123 614-277-3004 NOV 13 2017

arovecityohio.gov/developmen

	614-277-3004		grovecityohio.gov/d	<u>levelopment</u>		
PROJECT / PROPERTY INF	ORMATION	and post Entressive				
PROJECT NAME: Beulah Park						
PROJECT LOCATION: Beulah Pa	rk; Southeast of the inte	rsection of Southw	vest Blvd. and Demorest Rd.			
STREET ADD	RESS (OR NEAREST INTERSECTION WI	TH DISTANCE AND DIRECTION)			
PARCEL ID NUMBER: See attach	ed A	ACREAGE AFFECTED BY THIS APPLICATION:				
EXISTING ZONING: SD-3, IND-2		XISTING LAND USE:	Vacant/Former Horse Race '	Track		
PROPOSED ZONING: PUD-R, PU	JD-C P	ROPOSED LAND USE:	Single-family residential, mul- residential, commercial & assi	ti-family		
PROPERTY OWNER INFOR	MATION		residential, commercial & assi	isted frying		
Note: Property ownership information is to	reflect how the property is held in a	accordance with the Frankli	n County Auditor's Office.			
GC Beulah Park Investments, I	LC 250 E. Broad St.,	Suite 1100	Columbus, OH 43215			
Name	Address		City, State, Zip	e distante in the last		
614-228-5775		pat@kelley-co.com				
Phone	Fax	Email				
APPLICANT INFORMATION	CAN AND A SECURIOR SHOWS		· · · · · · · · · · · · · · · · · · ·	of the second state of		
Note: The applicant is the person(s) or entity	seeking approval of this application.					
Patrick Kelley	Manager	GC Beulah Park Investme		s, LLC		
Name	Title	Company / Organization				
50 E. Broad St., Suite 1100 Columbus			OH 43215			
Address	City		State, Zip			
614-228-5775			pat@kelley-co.com			
Phone	Fax		Email			
AUTHORIZED REPRESENT	ATIVE		Check box if same as A	Applicant		
Note: The authorized representative is the represent and make commitments on berepresentative, applicant or related parties	half of the applicant. The City doe	e applicant. As the authories not take any responsibil	ized representative you have the proper a lity for the lack of communication betwee	uthority to speak, en the authorized		
Donald Plank	Attorney		Plank Law Firm, LPA			
Name	Title	Company / Organization				
411 E. Town St., FL 2	Columbus	OH 43215				
Address	City	State, Zip				
614-947-8600	614-228-1790	dtp@planklaw.com				
Phone	Fax		Email			
Legal counsel Relationship to the Applicant: (e.g. legal coun	aal anginas askitst leed de		V-Control of the Control of the Cont			
Relationship to the Applicant. (e.g. legal coun	sei, engineer, architect, iand pianner,	contractor, etc.)				
SUBMITTAL REQUIREMEN Instructions: All blanks/boxes must be or calculated in accordance with the City's Fe all required supplementary documentation attached supplemental requirements.	ompleted or checked in order for the Recovery Policy. The submittal	shall include the required r	number of copies (properly folded and colla	ated) and contain		
	Fee Calculation		Submittal Items	(check box)		
Application Fee:	\$ 150.00	Completed Ap	plication (signed and notarized):			
Engineering Review Fee:	+ \$	Submittal Fee	(including engineer review fee):			
Total Submittal Fee:	= \$	Ten (10) Copie	es of Plans (folded and collated):			

PROPERTY OWNER AUTHORIZATIO	N OF APPLICANT SUBMITTAL	AND SITE VISIT(S)
I Patrick Kelley, Manager of GC Beulah P	ark Investments, LLC, the co	urrent property owner hereby authorize the
		to submit this application. I agree to be
bound by all representations and agreemen	nts made by the applicant and/or	r their authorized representative.
Additionally, as the current property owner	r, knowing that site visits to the	property may be necessary, I hereby authorize
City representatives to visit and/or photogram	aph the property described in thi	s application.
Signature of Current Property Owner:	atrick of we	Date: 11/10/17
STATE OF OHIO, COUNTY OF FRANKLII	N	
The above individual(s), being first duly sworn, affidavit subscribed by him/her, knows the conte	deposes on oath and says that he/s ents thereof, and that the statements	he has read the foregoing s therein are true.
SUBSCRIBED AND SWORN TO before me this	s 10th day of NOVEMBS	en, 20 <u>17</u> .
Official Seal and Signature of Notary Public		BARBARA A. PAINTER Notary Public, State of Ohio My Commission Expires AUGUST 3, 2020
Applicant's / Authorized Representati	ve's Affidavit	
I Donald Plank	The state of the s	, the applicant or authorized representative,
have read and understand the contents of	this application. The information	n contained in this application, attached exhibits
and other information submitted is complete	e and in all respects true and co	rrect, to the best of my knowledge and belief.
Signature of Applicant or Authorized Repre	esentative: Jude /	Fale Date: 10/23/17
STATE OF OHIO, COUNTY OF FRANKLII	N	
The above individual(s), being first duly sworn, affidavit subscribed by him/her, knows the conte		
SUBSCRIBED AND SWORN TO before me this	s 23rd day of OCTOBER	, 2017.
Babara a. Bainter	ANAL COM	
Official Seal and Signature of Notary Public	BARBARA A. F. Notary Public, St. My Commission Expir	
FOR OFFICE USE ONLY		

PC RECOMMENDATION:

CITY'S REVIEW ENGINEER:

TENTATIVE PC MEETING DATE:

PROJECT ID NUMBER:

CHECK NUMBER: